Targeted Testing

Groups that are not at high risk for TB should not be tested routinely because:

- ► Testing in low-risk populations divert resources from other priority activities
- ► Positive test results in low-risk persons may not represent TB infection.

Steps in a TB Risk Assessment

1. Assign responsibility to a specific person.

2. Determine time period to be assessed (usually previous calendar year).

Determine the counties to be included in assessment.

Steps Continued

4. Calculate the # of TB cases reported in the counties included in the assessment (http://www.state.sd.us/doh/TB.)

5. Calculate the # of TB cases encountered in the facility.

6. Determine the type of health care setting:

Types of Health Care Settings

▶ Inpatient settings with less than 200 beds

► Inpatient settings with more than 200 beds

▶ Outpatient/non-traditional setting

Steps Continued

7. Determine TB risk category:

Low Risk

- Inpatient < 200 beds = < 3 TB cases</p>
- Inpatient > 200 beds = < 6 TB cases</p>
- Outpatient/nontraditional = < 3 TB cases</p>

Risk Categories

Medium Risk

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Inpatient < 200 beds = \geq 3 TB cases
Inpatient > 200 beds = \geq 6 TB cases
Outpatient/Non-traditional \geq 3 Tb cases
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Risk Categories

Potential Ongoing Transmission

Evidence of ongoing transmission of TB regardless of setting.

TB Screening Recommendations

Low Risk

- Baseline TB screening for new staff upon hire (TB skin test or blood test)
- No annual testing recommended
- If + TB skin test, require chest X-ray to rule out active TB

TB Screening Recommendations

Medium Risk

Baseline TB screening for new staff upon hire (TB skin test or blood test)

Annual TB screening

If + TB skin test, require chest X-ray to rule out active TB

TB Screening Recommendations

Potential Ongoing Transmission

TB Screening every 8-10 weeks until no evidence of ongoing transmission

This is a temporary classification

TB Screening Requirements

Staff involved in the initial assessment or admissions department of an agency that provides Level III.2-D clinically-managed residential detoxification program, Level III.7 medically-monitored intensive inpatient treatment program for adults or adolescents, or Level III.1 clinically-managed lowintensity residential treatment program is required to have an annual skin test.

Shall be conducted for each new client within 24 hours of the onset of services to determine if the client has had any of the following symptoms within the previous three months:

- (1) Productive cough X 2-3 weeks duration;
- (2) Unexplained night sweats;
- (3) Unexplained fevers; or
- (4) Unexplained weight loss.

Any client determined to have one or more of the above symptoms within the last three months will be immediately referred to a physician for a medical evaluation to determine the absence or presence of active disease.

Any client confirmed or suspected to have infectious tuberculosis will be excluded from services until they are determined to no longer be infectious by the physician.

"Guidelines for Preventing the Transmission of *Mycobacterium tuberculosis* in Health-Care Facilities, 2005"

Can be found on DOH website: http://www.cdc.gov/mmwr/pdf/rr/rr5417.pdf

CDC webpage: www.cdc.gov/tb